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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/020,864	10/22/2001	Mark Wurster	24733-0002	9678

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EXAMINER	
COBANOGLU, DILEK B	
ART UNIT	**PAPER NUMBER**
3626	

NOTIFICATION DATE	DELIVERY MODE
09/10/2007	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

dcptopatent@hhlaw.com

Office Action Summary	Application No.	Applicant(s)	
	10/020,864	WURSTER, MARK	
	Examiner	Art Unit	
	Dilek B. Cobanoglu	3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on *08 June 2007*.

2a)☒ This action is **FINAL**. 2b)☐ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) *1-36,40 and 41* is/are pending in the application.

4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) *1-36,40 and 41* is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☐ The drawing(s) filed on _____ is/are: a)☐ accepted or b)☐ objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11)☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

a)☐ All b)☐ Some * c)☐ None of:

1.☐ Certified copies of the priority documents have been received.

2.☐ Certified copies of the priority documents have been received in Application No. _____.

3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☐ Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date _____.
4) ☐ Interview Summary (PTO-413) Paper No(s)/Mail Date. _____ .
5) ☐ Notice of Informal Patent Application
6) ☐ Other: _____.

DETAILED ACTION

Notice to Applicant

1. This communication is in response to the amendment received on 06/08/2007. Claims 37-39 have been canceled. Claims 40-41 are newly added. Claims 1-36 and 40-41 remain pending in this application.

Claim Rejections - 35 USC § 102

2. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

> (a) the invention was known or used by others in this country, or patented or described in a printed publication in this or a foreign country, before the invention thereof by the applicant for a patent.

3. Claims 1-5, 7-9, 11-36 are rejected under 35 U.S.C. 102(a) as being unpatentable by Surwit et al. (hereinafter Surwit) (U.S. Patent No. 6,024,699).

A. Claim 1 has been amended now to recite a method for computing a periodic anticoagulation medication regimen for a patient, the method comprising the steps of:

i. Receiving current information for the patient (Surwit; abstract, col. 2, lines 49-55);

ii. Soliciting additional treatment information from a medical professional (Surwit; col. 11, lines 15-33, col. 11, line 60 to col. 12, line 14, col.13, lines 1-26, col. 13, line 63 to col. 14, line 6, figure 3 and 5); and

iii. Automatically calculating the periodic anticoagulation medication regimen based on the current patient information and the additional treatment information (Surwit et al.; col. 7, lines 5-13, col. 11, lines 15-33, col. 12, lines 44-55).

B. Claim 2 has been amended now to recite the method in accordance with claim 1, wherein the current patient information includes at least one of a patient's current periodic anticoagulation medication dose, current international normalized ratio, and international normalized ratio goal (Surwit et al.; col. 6, lines 49-55, col. 7, lines 5-13 and col. 12, lines 44-55).

C. Claim 3 has been amended now to recite the method in accordance with claim 2, wherein the new periodic dose medication regimen is based on at least one of the patient's current periodic anticoagulation medication dose, current international normalized ratio, and international normalized ratio goal (Surwit et al.; col. 7, lines 5-13, col. 12, lines 44-55).

D. Claim 4 has been amended now to recite the method in accordance with claim 1, wherein the new periodic dose medication regimen is calculated based on a equation customizable by each user (Surwit et al.; col. 7, lines 47-63).

E. As per claim 5, Surwit et al. discloses the method in accordance with claim 1, further comprising displaying standard medical guidelines in response to a user's request (Surwit et al.; col. 6, lines 51-67).

F. Claim 7 has been amended now to recite the method in accordance with claim 1, further comprising converting the new periodic dose medication into daily

doses based on a number of milligrams in a single pill (Surwit et al.; col. 19, lines 41-65).

G. As per claim 8, Surwit et al. discloses the method in accordance with claim 7, wherein said converting step further comprises receiving from a user over the network a setting of a predetermined number of milligrams in a single pill as defined by the user (Surwit et al.; col. 19, lines 41-65).

H. As per claim 9, Surwit et al. discloses the method in accordance with claim 1, wherein the anticoagulation medication is low molecular weight heparin (Surwit et al.; col. 6, lines 49-55).

Examiner considers that anticoagulation therapy would include low molecular weight heparin.

I. As per claim 11, Surwit et al. discloses the method in accordance with claim 1, further comprising displaying a list of patients that are overdue for a scheduled visit as of a current date (Surwit et al.; col. 18, line 48-63 to col. 19, line 7, Figure 13).

J. As per claim 12, Surwit et al. discloses the method in accordance with claim 11, wherein the scheduled visit is overdue if delayed more than a predetermined number of days, as defined by a user, relative to a current date (Surwit et al.; col. 17, line 58 to col. 18, line 3).

K. As per claim 13, Surwit et al. discloses the method in accordance with claim 1, wherein the current information includes updated medication information, the method further comprising automatically displaying medication interaction

messages in response to receiving the updated medication information (Surwit et al.; col. 8, line 64 to col. 9, line 7, col. 9, lines 59-67).

L. As per claim 14, Surwit et al. discloses the method in accordance with claim 1, further comprising displaying a list of patients scheduled for a visit on a current date (Surwit et al.; col. 11, line 60 to col. 12, line 5).

M. As per claim 15, Surwit et al. discloses the method in accordance with claim 14, further comprising selecting a particular patient from the list of patients scheduled (Surwit et al.; col. 12, lines 17-19).

N. As per claim 16, Surwit et al. discloses the method in accordance with claim 1, further comprising generating a report of at least one of patient, physician, and clinic summary information (Surwit et al.; col. 11, lines 15-32).

O. As per claim 17, Surwit et al. discloses the method in accordance with claim 16, wherein said report is customizable as to which fields are to be included therein (Surwit et al.; col. 11, lines 15-32).

P. As per claim 18, Surwit et al. discloses the method in accordance with claim 17, wherein said report is customizable in at least one of sorting and grouping of the fields included therein (Surwit et al.; col. 17, lines 42-57).

Q. As per claim 19, Surwit et al. discloses the method in accordance with claim 1, further comprising the steps of:

i. accessing the system via a web site (Surwit et al.; col. 9, lines 31-34); and

ii. receiving a selection of preferences to customize configuration of the web site (Surwit et al.; col. 9, lines 50-58).

R. Claim 20 has been amended now to recite the method in accordance with claim 1, further comprising automatically calculating a scheduled return visit based on whether the new periodic dose medication regimen has changed relative to the current periodic anticoagulation medication dose (Surwit et al.; col. 8, lines 47-55).

S. As per amended claims 21-36, they are system claims, which repeat the same limitations of claims 1-4, 7-9, 11-20, the corresponding method claims, as a collection of elements as opposed to a series of process steps. Since the teachings of Surwit et al. disclose the underlying process steps that constitute the methods of claims 1-4, 7-9, 11-20, it is respectfully submitted that they provide the underlying structural elements that perform the steps as well. As such, the limitations of claims 21-36 are rejected for the same reasons given above for claims 1-4, 7-9, 11-20.

T. As per newly added claim 40, Surwit discloses the method according to claim 1, the additional treatment information including reason for anticoagulation administration, desired intensity of anticoagulation, and anticipated duration of anticoagulation therapy (Surwit; col. 11, lines 15-33, col. 11, line 60 to col. 12, line 14, figure 3)

Examiner considers that the prescription for medication includes the reason, desired intensity and anticipated duration of the medication.

U. The newly added claim 41 repeats the same limitations as claim 40, therefore is rejected for the same reasons given above in the rejection of claim 40 and incorporated herein.

Claim Rejections - 35 USC § 103

4. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

5. Claims 6 and 10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Surwit et al. (U.S. Patent No. 6,024,699) in view of Baruch (U.S. Patent Publication No. 2002/0077849).

A. As per claim 6, Surwit et al. discloses the method in accordance with claim 5.

Surwit et al. fails to expressly teach the standard medical guidelines published by American College of Chest Physicians. However, this feature is well known in the art, as evidenced by Baruch.

In particular, Baruch discloses standard medical guidelines published by American College of Chest Physicians (Baruch; paragraph 0065 and 0068).

It would have been obvious to one having ordinary skill in the art at the time of the invention to have combined the guidelines such as Guidelines for the Diagnosis and Management of Asthma with the American College

of Chest Physicians with the motivation of examining healthcare practitioner's adherence to national guidelines in prevention of disease, while also providing real time feedback (Baruch; paragraph 0065).

B. As per claim 10, Surwit et al. discloses the method in accordance with claim 1.

Surwit et al. fails to expressly teach the database of patient records based on at least one of patient's last name, patient's first name, medical record number, social security number and patient identification. However, this feature is well known in the art, as evidenced by Baruch.

In particular, Baruch discloses searching a database of patient records based on at least one of patient's last name, patient's first name, medical record number, social security number and patient identification (Baruch; paragraph 0052).

It would have been obvious to one having ordinary skill in the art at the time of the invention to have combined the databases for storing and manipulating patient data with the a database of patient records based on at least one of patient's last name, patient's first name, medical record number, social security number and patient identification with the motivation of lower the cost of medical malpractice and facility error rates (Baruch; paragraph 0053, lines 35-37).

Response to Arguments

6. Applicant's arguments filed 06/08/2007 have been fully considered but they are not persuasive. Applicant's arguments will be addressed below in the order in which they appear.

A. In response to Applicant's argument about Surwit does not teach "solicit additional treatment information from a medical professional"; Examiner respectfully submits that Surwit teaches that "A case manager (medical professional) accesses a PAC server 14 via a CMC 16 to review the medical conditions of multiple patients. Case managers preferably are able to review, via information downloaded from a PAC server 14, all patient activity and data for their assigned patients including data transmission history, prescription review, analysis and adjustment. A CMC 16 allows a case manager to review patient data in various formats, including a hierarchical, problem-oriented format wherein patients with medical conditions requiring immediate attention are presented foremost. A CMC 16 may also allow a case manager to add, edit, and delete certain patient data stored in a PAC server 14. A CMC 16 also can interface directly with each PPM 12 to provide a patient with information and to modify illness-specific software contained therein. For example, an insulin dosage algorithm

contained within the internal software of a particular patient's PPM can be modified remotely by a case manager via a CMC 16." Surwit continues in col. 13, line 63 to col. 14, line 6 and figure 5 that "case manager may be presented with an option to schedule a patient visit with a healthcare provider (Block 266) or with an option to seek expert medical input (Block 268)...obtaining input from a medical expert (Block 278)." Therefore the case manager can add, edit and delete certain patient data in a PAC server, for example an insulin dosage algorithm contained within the internal software of a particular patient's PPM can be modified remotely by case manager via a CMC 16 (Surwit; col. 11, lines 15-33).

Conclusion

7. **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

8. A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

9. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Dilek B. Cobanoglu whose telephone number is 571-272-8295. The examiner can normally be reached on 8-4:30.

10. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on 571-272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

11. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

DBC

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Art Unit 326
08/21/2007

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